

# **Center Complaint Inspection Summary Report**

All licensed child care programs are inspected at least once each year. Non-compliances are documented and grouped as Serious, Moderate or Low risk violations. Documenting statements and supplemental information may be included in this report. Licensing inspection reports from the previous three years can be viewed on the child care website at <a href="http://jfs.ohio.gov/CDC/childcare.stm">http://jfs.ohio.gov/CDC/childcare.stm</a>. This includes complaint investigation reports with substantiated allegations. For any other child care records, please contact the Child Care Help Desk at 1-877-302-2347, option 4.

Program Details			
Program Name	Program Number	Program Type	
YesWeCan Childcare	2220027428	Child Care Center	
Address		County	
322 East Main st Batavia OH 45103	3	CLERMONT	

Inspection Information						
Inspection Type				Inspe	ection Scope	Inspection Notice
Complaint			Partial		Unannounced	
Reviewer(s) BRIAN CHASTAIN		Inspection Day Be		Begir	n Time	End Time
		08/21/2023 11:50		MA C	1:05 PM	
Summary of Findings						
No. Rules Verified	No. Rules with Non-cor	mpliances No. Serious Risl		(	No. Moderate Risk	No. Low Risk
6	4		0		3	1

Staff-Child Ratios at the Time of Inspection				
Group	Age Group/Range	Ratio Observed	Comment	
Infant/Toddler	0 to < 12 months	1 to 9		
Preschool	3 years to < 4 years	1 to 11		



### **Complaint Allegations**

If a program disagrees with a licensing finding, the program may request a review of the finding(s). Ohio Administrative Code 5101:2-12-03 and 5101:2-13-03 detail the process for submitting a request for review. The request for review must be submitted within seven business days from the receipt of the licensing report. In addition, if the program is star rated, the rating may be impacted if a serious or moderate risk non-compliance is cited.

#### Domain:01 Ratio & Supervision

Rule: 5101:2-12-19 Child Guidance

Code: The program staff shall use developmentally appropriate techniques when managing children's behavior. Corporal punishment is prohibited, as well as any cruel, harsh, unusual or extreme techniques.

Allegation: A child care staff member uses inappropriate guidance and management techniques with children.

**Determination**: Substantiated

Findings: During the inspection, it was determined that although the technique named in the allegation was unable to be determined, a child care staff member had used the inappropriate techniques in number 7 below when managing unacceptable behavior in children:

- 1. Utilize cruel, harsh, unusual, or extreme techniques;
- 2. Utilize any form of corporal punishment;
- 3. Delegate children to manage or discipline other children;
- 4. Use physical restraints on a child;
- 5. Restrain a child by prone restraint or any means other than holding children for a short period of time, such as in a protective hug, so that the children may regain control;
- 6. Place children in a locked room or confine children in any enclosed area;
- 7. Confine children to equipment such as cribs or highchairs (a child was confined in a high chair);
- 8. Humiliate, threaten or frighten children;
- 9. Subject children to profane language or verbal abuse;
- 10. Make derogatory or sarcastic remarks about children or their families;
- 11. Punish children for failure to eat or sleep or for toileting accidents;
- 12. Withhold any food (including snacks and treats), rest or toilet use;
- 13. Punish an entire group of children due to the unacceptable behavior of one or a few;
- 14. Isolate and restrict children from all activities for an extended period of time.

Child care staff members and other employees must always use appropriate guidance and management methods with children. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Risk Level: Moderate

Corrective Action Plan Due: 09/23/2023

# Domain:07 Diapering & Infant Care

Rule: 5101:2-12-23 Diapering and Toilet Training

Code: The program staff is required to use and discard a separation material between each diaper change.

Allegation: The program does not use a disposable separation material between the child and the changing surface for each diaper change.

**Determination**: Substantiated



Findings: During the inspection, it was determined that the staff did not use a separation material for each diaper change, as required by the rule, at the diaper changing station. Submit the program's corrective action plan to the Department to verify compliance with the requirements of this rule.

Risk Level: Low

Corrective Action Plan Due: 09/23/2023

## **Summary of Additional Non-Compliances**

Serious Risk Non-Compliances				
No Additional Serious Risk Non-Compliances were observed during this inspection				

#### **Moderate Risk Non-Compliances**

#### Domain:01 Ratio & Supervision

Rule: 5101:2-12-18 Ratio

Code: The program is required to maintain the appropriate staff to child ratio for each group served.

Findings: During the inspection, a ratio of one child care staff member for 9 children was determined to have occurred for the infant/toddler group when the situation in number 1 below occurred:

- 1. A child care staff member stepped out of the room more than once.
- 2. A child care staff member had not arrived at work on time.
- 3. Children were present who were not scheduled to be there.
- 4. A child care staff member was unable to work.
- 5. A child was injured in that group.
- 6. A child arrived in the group before a second staff member was scheduled to arrive with the group.
- 7. Two groups were combined, and the program did not follow the ratio for the youngest child in the group.
- 8. A child was transitioning to the next older age group, and the program did not follow the ratio for the youngest child in the group
- 9. Ratio was doubled for more than two hours while children were napping.
- 10. Ratio was doubled while children were napping for a group that included at least one infant.
- 11. Ratio was doubled while children were napping and there were not enough staff members in the building to meet staff/child ratio.
- 12. Ratio was doubled in the school age group to allow access to the program, however, the program does not serve only school age children.

- 13. Both child care staff members did not have a working communication device when one staff member left the group to allow access to the school age only program.
- 14. The child care staff member did not return to the group after allowing access to the school age only program.
- 15. Other [ ].

Additional child care staff members must be hired or current child care staff members must be rescheduled to maintain compliance. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/23/2023

#### Domain:07 Diapering & Infant Care

Rule: 5101:2-12-20 Cribs

Code: The program staff is required to remove any items listed in rule that are a potential suffocation risk from cribs.

Findings: During the inspection, it was determined that a child had been placed in a crib with an object that created a potential strangulation or suffocation risk, as indicated in numbers 4, 11 below:

- Bib
- 2. Pacifier clip/ribbon
- 3. Teething jewelry
- 4. Blanket for infant under twelve months old
- 5. Pillow
- 6. Boppie
- 7. Bumper pad
- 8. Clothing stored in the crib
- 9. Diaper bag
- 10. Object or toy strung over the crib in which a child can pull himself up
- 11. Stuffed animal that is large/soft enough to conform to the shape of the child's face
- 12. Other [ ]

The rule prohibits any item which obstructs child-care staff's visibility or poses a risk of strangulation or suffocation from being placed on or in a crib. Remove the item(s) immediately. Provide staff training. Submit the program's corrective action plan, which includes a statement that training was provided, to the Department to verify compliance with the requirements of this rule.

Corrective Action Plan Due: 09/23/2023

Low Risk	Non-Com	pliances
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No Low Additional Risk Non-Compliances were observed during this inspection



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